

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	SUP	Jc - 920	10/31/01
RESPONSE FORMALITY REVIEW			09/15/01

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	7/3/01
2	7/16/01
3	7/6/01
4	7/22/01
5	7/31/01
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32	N
33	N
34	N
35	N
36	N
37	N
38	N
39	N
40	N
41	N
42	N
43	N
44	N
45	N
46	N
47	N
48	N
49	N
50	N

Claim	Date
Final	
Original	
1	7/3/01
2	7/6/01
3	7/22/01
4	7/31/01
5	8/2/01
6	8/20/01
7	8/21/01
51	✓ ✓ ✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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11/01/01